

Government of Western Australia North Metropolitan Health Service Women and Newborn Health Service



# ADULT MEDICATION GUIDELINE

# **Glyceryl Trinitrate**

Scope (Staff): All WNHS Staff

Scope (Area): Obstetrics and Gynaecology

This document should be read in conjunction with the **Disclaimer**.

# Quick LinksDoseAdministrationMonitoringPregnancy and<br/>BreastfeedingRestrictionsFormulary: UnrestrictedMedication Class

### Nitrates

# Presentation

Ointment (Rectogesic®): 0.2% (2 mg/g)

Transdermal patch: 5 mg/ 24hr & 10 mg/ 24hr

Ampoule: 50 mg/ 10 mL

Sublingual spray: 400 microg/ dose

# Storage

Ointment: Store at room temperature, below 25°C and protect from light

Transdermal patch: Store below 30°C

Ampoule: Store at room temperature, below 25°C and protect from light

Sublingual spray: Store at room temperature, below 25°C

# Dose

# Uterine Relaxant (Caesarean Birth)

# Sublingual spray:

1 to 2 sprays (400 - 800 microg) administered as spray droplets under the tongue (do not inhale)

Repeat after 5 minutes if hypertonus sustained

### IV Bolus:

Administer 50 – 100 microg (1 – 2 mL of the solution prepared below) intravenously

### Tocolytic (Second line)

### Transdermal patch:

Apply a 5 or 10 mg patch to abdominal skin, and repeat the dose in 1 hour if the contractions persist (Maximum dose of 20 mg in 24 hours)

### **Uterine Inversion**

### Sublingual spray:

400 microg sublingually

### Anal fissures

### Ointment:

Refer to Adult Medication Protocol: Anorectal Products

# Administration

If possible, use non-PVC bags and giving sets to reduce adsorption of medication onto plastic. If PVC bag and/or giving sets are used, titrate the dose and rate to effect.

### IV Bolus for Uterine Relaxation (Caesarean Birth)

NB: The standard IV preparation of GTN requires careful dilution in preparation for administration.

*Dilution:* Add 1 mL (5 mg) of GTN into a 100 mL bag sodium chloride 0.9% (concentration is 50 microg/ mL)

Withdraw 20 mL (label syringe clearly) and discard remaining premixed GTN bag.

Administration: Give 1 - 2 mL (50 - 100 microg) of the diluted solution and repeat after 15 - 30 seconds if required.

### Sublingual spray:

Prime spray before using for the first time by pressing nozzle 5 times into air or prime with 1 spray if it hasn't been used for 7 days. 5 sprays are required for priming if it has been more than

4 months since use. Spray under the tongue, do not inhale.

### Transdermal patch:

Apply to clean, dry skin on the chest or upper arm.

### Ointment:

Refer to Adult Medication Protocol: Anorectal Products

## Monitoring

**IV:** monitor blood pressure and heart rate and have vasopressor on hand. Observe for uterine atony and manage accordingly.

Continuous cardiac monitoring may be required.

Do not stop GTN IV infusion abruptly because of the potential for rebound symptoms.

### Pregnancy

1<sup>st</sup> Trimester: Considered safe to use

2<sup>nd</sup> Trimester: Considered safe to use

3<sup>rd</sup> Trimester: Considered safe to use

### Breastfeeding

Considered safe to use (ointment)

Monitoring required (IV, transdermal, sublingual)

For more information, please contact KEMH Obstetric Medicines Information Service.

### **Related Policies, Procedures & Guidelines**

### WNHS Clinical Practice Guidelines:

Caesarean birth

Preterm labour

Adult Medication Monograph: Anorectal Products

Postpartum Complications (PPH, uterine inversion)

Preoperative Medication Management

Adult Resuscitation Drug Protocol - Glyceryl Trinitrate (GTN) Spray

### References

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